

# EXHIBIT A

Fill in this information to identify the case:

Debtor 1 Graciela Garcia

Debtor 2 Pedro Garcia  
(Spouse, if filing)

United States Bankruptcy Court for the: Northern District of Illinois

Case number 18-05801

## Official Form 410

## Proof of Claim

12/15

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

## Part 1: Identify the Claim

1. Who is the current creditor?	<u>City of Chicago Department of Finance/Bureau of Utility Billing and Customer Service</u> Name of the current creditor (the person or entity to be paid for this claim)	
	Other names the creditor used with the debtor <u>Bureau of Water Billing and Customer Service</u>	
2. Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____	
3. Where should notices and payments to the creditor be sent?  Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	<b>Where should notices to the creditor be sent?</b>  <u>City of Chicago - Utility Billing</u> Name _____ <u>Post Office Box 6330</u> Number _____ Street _____ <u>Chicago</u> <u>IL</u> <u>60680</u> City _____ State _____ ZIP Code _____ Contact phone <u>(312)747-9598</u> Contact email <u>dominique.gary@cityof</u>	<b>Where should payments to the creditor be sent? (if different)</b>  Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____ Contact phone _____ Contact email _____
Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____		
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____ Filed on _____ MM / DD / YYYY	
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____	

**Part 2: Give Information About the Claim as of the Date the Case Was Filed**

6. Do you have any number you use to identify the debtor? ☐ No  
☒ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: 5 0 1 7

7. How much is the claim? \$ 2,658.55 Does this amount include interest or other charges?  
☐ No  
☒ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. What is the basis of the claim? Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.  
Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).  
Limit disclosing information that is entitled to privacy, such as health care information.  
City of Chicago - Water Service - Statutory Lien

9. Is all or part of the claim secured? ☐ No  
☒ Yes. The claim is secured by a lien on property.  
**Nature of property:**  
☐ Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.  
☐ Motor vehicle  
☒ Other. Describe: Statutory Lien - 4811 S Justine  
**Basis for perfection:** \_\_\_\_\_  
Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)  
**Value of property:** \$ \_\_\_\_\_  
**Amount of the claim that is secured:** \$ 2,658.55  
**Amount of the claim that is unsecured:** \$ \_\_\_\_\_ (The sum of the secured and unsecured amounts should match the amount in line 7.)  
**Amount necessary to cure any default as of the date of the petition:** \$ \_\_\_\_\_  
**Annual Interest Rate** (when case was filed) \_\_\_\_\_ %  
☐ Fixed  
☐ Variable

10. Is this claim based on a lease? ☒ No  
☐ Yes. Amount necessary to cure any default as of the date of the petition. \$ \_\_\_\_\_

11. Is this claim subject to a right of setoff? ☒ No  
☐ Yes. Identify the property: \_\_\_\_\_

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

☒ No

☐ Yes. Check all that apply:

Amount entitled to priority

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

\$ \_\_\_\_\_

☐ Up to \$2,775\* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use, 11 U.S.C. § 507(a)(7).

\$ \_\_\_\_\_

☐ Wages, salaries, or commissions (up to \$12,475\*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).

\$ \_\_\_\_\_

☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).

\$ \_\_\_\_\_

☐ Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).

\$ \_\_\_\_\_

☐ Other. Specify subsection of 11 U.S.C. § 507(a)( ) that applies.

\$ \_\_\_\_\_

\* Amounts are subject to adjustment on 4/01/16 and every 3 years after that for cases begun on or after the date of adjustment.

**Part 3: Sign Below**

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

☐ I am the creditor.

☒ I am the creditor's attorney or authorized agent.

☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 03/08/2018  
MM / DD / YYYY

/s/Dominique D. Gary

Signature

Print the name of the person who is completing and signing this claim:

Name	<u>Dominique</u>	<u>Danielle</u>	<u>Gary</u>
	First name	Middle name	Last name
Title	<u>Accounting Technician I</u>		
Company	<u>City of Chicago/Dept. of Finance - Bureau of Utility Billing and Customer Svc.</u>		
	Identify the corporate servicer as the company if the authorized agent is a servicer.		
Address	<u>Post Office Box 6330</u>		
	Number	Street	
	<u>Chicago</u>		<u>IL 60680</u>
	City	State	ZIP Code
Contact phone	<u>(312)747-9598</u>	Email	<u>dominique.gary@cityofchicago</u>

Case 18-05801 Claim 2 Part 2 Filed 03/08/18 Desc Itemization of Services  
GARCIA, PEDRO--CSR Interface (UCACSRI 3.2)(0459.038)(Doc 27-1) Debtor(s) Page 1 of 1

Cust Code: 175017 Prem Code: 175017 Address: 4811 S JUSTINE ST CHICAGO IL 60609-4225 Service Selector: All Services  
A-1 Non-Metered Small  
A-2 Sewer Small Reside

Timer: [On] [Off]

Summary | Bill Information | Collection | Service | Deposit | Contact History | A/R Totals

Charge Date	Due Date	Service	Rate	Billed Charge	Balance
25-JAN-2018		PENR		0.68	0.68
25-JAN-2018		PENW		11.80	11.80
26-DEC-2017		PENR		0.39	0.39
26-DEC-2017		PENW		8.93	8.93
27-NOV-2017		PENR		0.29	0.29
27-NOV-2017		PENW		9.64	9.64
01-NOV-2017	15-DEC-2017	PENR		0.29	0.29
01-NOV-2017	15-DEC-2017	PENW		10.38	10.38

895.53 + 895.51 + 318.83 + 306.42 + 242.26 - 0.00 = 2658.55

Water Sewer Water Pen Sewer Pen. Other Unapplied Payments A/R Total

# EXHIBIT B

Fill in this information to identify your case and this filing:

Debtor 1	Graciela Garcia		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Pedro Garcia		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS			
Case number			

☐ Check if this is an amended filing

## Official Form 106A/B

### Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.
- ☒ Yes. Where is the property?

1.1

4811 S Justine St.

Street address, if available, or other description

Chicago IL 60609-0000

City State ZIP Code

Cook

County

What is the property? Check all that apply

- ☒ Single-family home
- ☐ Duplex or multi-unit building
- ☐ Condominium or cooperative
- ☐ Manufactured or mobile home
- ☐ Land
- ☐ Investment property
- ☐ Timeshare
- ☐ Other

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?	Current value of the portion you own?
\$90,000.00	\$90,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

Who has an interest in the property? Check one

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number:

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$90,000.00

#### Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

Debtor 1 Graciela Garcia  
Debtor 2 Pedro Garcia

Case number (if known)

**3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**☐ No  
☒ Yes3.1 Make: Honda  
Model: Pilot  
Year: 2004  
Approximate mileage: 250,000  
Other information:**Who has an interest in the property?** Check one

- ☒
- Debtor 1 only
- 
- ☐
- Debtor 2 only
- 
- ☐
- Debtor 1 and Debtor 2 only
- 
- ☐
- At least one of the debtors and another

☐ Check if this is community property  
(see instructions)Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.**Current value of the entire property?****Current value of the portion you own?**\$3,500.00\$3,500.003.2 Make: Dodge  
Model: Stratus  
Year: 2004  
Approximate mileage: 250,000  
Other information:**Who has an interest in the property?** Check one

- ☒
- Debtor 1 only
- 
- ☐
- Debtor 2 only
- 
- ☐
- Debtor 1 and Debtor 2 only
- 
- ☐
- At least one of the debtors and another

☐ Check if this is community property  
(see instructions)Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.**Current value of the entire property?****Current value of the portion you own?**\$500.00\$500.003.3 Make: Chevy  
Model: Cheyenne  
Year: 1998  
Approximate mileage: 130,000  
Other information:**Who has an interest in the property?** Check one

- ☐
- Debtor 1 only
- 
- ☒
- Debtor 2 only
- 
- ☐
- Debtor 1 and Debtor 2 only
- 
- ☐
- At least one of the debtors and another

☐ Check if this is community property  
(see instructions)Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.**Current value of the entire property?****Current value of the portion you own?**\$800.00\$800.00

Not running, broken engine

**4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories***Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories*☒ No  
☐ Yes**5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>**\$4,800.00**Part 3: Describe Your Personal and Household Items****Do you own or have any legal or equitable interest in any of the following items?****Current value of the portion you own?**  
Do not deduct secured claims or exemptions.**6. Household goods and furnishings***Examples: Major appliances, furniture, linens, china, kitchenware*☐ No  
☒ Yes. Describe.....Fridge, stove, microwave, couch, toaster oven\$1,500.00



Debtor 1 Graciela Garcia  
Debtor 2 Pedro Garcia

Case number (if known)

**7. Electronics***Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games☐ No☒ Yes. Describe.....

TV

\$150.00

**8. Collectibles of value***Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles☐ No☒ Yes. Describe.....

Silver dollar coins (5)

\$100.00

**9. Equipment for sports and hobbies***Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments☒ No☐ Yes. Describe.....**10. Firearms***Examples:* Pistols, rifles, shotguns, ammunition, and related equipment☒ No☐ Yes. Describe.....**11. Clothes***Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories☐ No☒ Yes. Describe.....

Necessary wearing apparel

\$200.00

**12. Jewelry***Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver☐ No☒ Yes. Describe.....

Everyday jewelry

\$50.00

**13. Non-farm animals***Examples:* Dogs, cats, birds, horses☐ No☒ Yes. Describe.....

2 Dogs: Pitbull mix and french poodle

\$50.00

**14. Any other personal and household items you did not already list, including any health aids you did not list**☒ No☐ Yes. Give specific information.....**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here .....**

\$2,050.00

**Part 4: Describe Your Financial Assets****Do you own or have any legal or equitable interest in any of the following?****Current value of the**

Official Form 106A/B

Schedule A/B: Property

page 3

Debtor 1 Graciela Garcia  
Debtor 2 Pedro Garcia

Case number (if known)

portion you own?  
Do not deduct secured  
claims or exemptions.**16. Cash***Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition☒ No☐ Yes.....**17. Deposits of money***Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.☐ No☒ Yes.....

Institution name:

17.1. Checking Account Chase Bank \$3,200.00

17.2. Savings Account Chase Bank \$100.00

**18. Bonds, mutual funds, or publicly traded stocks***Examples:* Bond funds, investment accounts with brokerage firms, money market accounts☒ No☐ Yes..... Institution or issuer name:**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**☒ No☐ Yes. Give specific information about them.....

Name of entity:

% of ownership:

**20. Government and corporate bonds and other negotiable and non-negotiable instruments***Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.☒ No☐ Yes. Give specific information about them

Issuer name:

**21. Retirement or pension accounts***Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans☐ No☒ Yes. List each account separately.

Type of account:

Institution name:

401(k) Employer plan \$3,500.00

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others☒ No☐ Yes. .... Institution name or individual:**23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)**☒ No☐ Yes..... Issuer name and description.**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No☐ Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

Debtor 1 Graciela Garcia  
Debtor 2 Pedro Garcia

Case number (if known)

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

- ☒ No  
☐ Yes. Give specific information about them...

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property***Examples: Internet domain names, websites, proceeds from royalties and licensing agreements*

- ☒ No  
☐ Yes. Give specific information about them...

**27. Licenses, franchises, and other general intangibles***Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses*

- ☒ No  
☐ Yes. Give specific information about them...

**Money or property owed to you?**

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

**28. Tax refunds owed to you**

- ☒ No  
☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

**29. Family support***Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement*

- ☒ No  
☐ Yes. Give specific information.....

**30. Other amounts someone owes you***Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else*

- ☒ No  
☐ Yes. Give specific information..

**31. Interests in insurance policies***Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance*

- ☐ No  
☒ Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

New York Insurance (Life Insurance)

Pedro Garcia, Moserrate Garcia

Unknown

State Farm - Life Insurance

Pedro Garcia

Unknown

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

- ☒ No  
☐ Yes. Give specific information..

**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment***Examples: Accidents, employment disputes, insurance claims, or rights to sue*

- ☒ No  
☐ Yes. Describe each claim.....

**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

- ☒ No

Debtor 1 Graciela Garcia  
Debtor 2 Pedro Garcia

Case number (if known)

☐ Yes. Describe each claim.....

## 35. Any financial assets you did not already list

☒ No☐ Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$6,800.00

## Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

☒ No. Go to Part 6.☐ Yes. Go to line 38.Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.  
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

☒ No. Go to Part 7.☐ Yes. Go to line 47.

## Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

☒ No☐ Yes. Give specific information.....

54. Add the dollar value of all of your entries from Part 7. Write that number here .....

\$0.00

## Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2 .....		\$90,000.00
56. Part 2: Total vehicles, line 5	\$4,800.00	
57. Part 3: Total personal and household items, line 15	\$2,050.00	
58. Part 4: Total financial assets, line 36	\$6,800.00	
59. Part 5: Total business-related property, line 45	\$0.00	
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00	
61. Part 7: Total other property not listed, line 54	+ \$0.00	
62. Total personal property. Add lines 56 through 61...	\$13,650.00	Copy personal property total \$13,650.00
63. Total of all property on Schedule A/B. Add line 55 + line 62		\$103,650.00

## Fill in this information to identify your case:

Debtor 1	Graciela Garcia		
	First Name	Middle Name	Last Name
Debtor 2	Pedro Garcia		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS			
Case number (if known)			

☐ Check if this is an amended filing

## Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

## 1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

## Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion if any
<b>2.1</b> City of Chicago Creditor's Name Dept. of Finance - Water Division PO Box 6330 Chicago, IL 60680-6330 Number, Street, City, State & Zip Code	Describe the property that secures the claim: 4811 S Justine St. Chicago, IL 60609 Cook County As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input checked="" type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) Water bill	\$2,750.00	\$90,000.00
<b>2.2</b> Ocwen Loan Servicing, LLC Creditor's Name 1661 Worthington Road, Suite 100 West Palm Beach, FL 33409 Number, Street, City, State & Zip Code	Describe the property that secures the claim: 4811 S Justine St. Chicago, IL 60609 Cook County As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)	\$99,000.00	\$90,000.00

Date debt was incurred Last 4 digits of account number 5017

Date debt was incurred Last 4 digits of account number 1035

Debtor 1 Graciela Garcia

Case number (if know) \_\_\_\_\_

First Name Middle Name Last Name

Debtor 2 Pedro Garcia

First Name Middle Name Last Name

Add the dollar value of your entries in Column A on this page. Write that number here:

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$101,750.00

\$101,750.00

**Part 2: List Others to Be Notified for a Debt That You Already Listed**

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.



Name, Number, Street, City, State & Zip Code  
City of Chicago - Corporation Couns  
121 N LaSalle Street  
Room 511  
Chicago, IL 60602

On which line in Part 1 did you enter the creditor? 2.1Last 4 digits of account number 5017

Name, Number, Street, City, State & Zip Code  
City of Chicago - Water Dept  
333 S State, Suite 330  
Chicago, IL 60604-3979

On which line in Part 1 did you enter the creditor? 2.1Last 4 digits of account number 5017

Name, Number, Street, City, State & Zip Code  
City of Chicago-Corporation Couns  
121 N LaSalle Street  
Suite 600  
Chicago, IL 60602

On which line in Part 1 did you enter the creditor? 2.1Last 4 digits of account number 5017

Name, Number, Street, City, State & Zip Code  
Ocwen Loan Servicing, LLC  
PO Box 24738  
West Palm Beach, FL 33416-4738

On which line in Part 1 did you enter the creditor? 2.2Last 4 digits of account number 1035

# EXHIBIT C

Fill in this information to identify your case:

Debtor 1 Graciela  Garcia  
First Name Middle Name Last Name

Debtor 2 Pedro  Garcia  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Northern District Of: Illinois  
(State)

Case number: 18-05801  
(If known)

☐ Check if this is an amended plan, and list below the sections of the plan that have been changed.

Official Form 113  
Chapter 13 Plan

12/17

Part 1: Notices

**To Debtors:** This form sets out options that may be appropriate in some cases, but the presence of an option on the form does not indicate that the option is appropriate in your circumstances or that it is permissible in your judicial district. Plans that do not comply with local rules and judicial rulings may not be confirmable.

*In the following notice to creditors, you must check each box that applies.*

**To Creditors:** Your rights may be affected by this plan. Your claim may be reduced, modified, or eliminated.

You should read this plan carefully and discuss it with your attorney if you have one in this bankruptcy case. If you do not have an attorney, you may wish to consult one.

If you oppose the plan's treatment of your claim or any provision of this plan, you or your attorney must file an objection to confirmation at least 7 days before the date set for the hearing on confirmation, unless otherwise ordered by the Bankruptcy Court. The Bankruptcy Court may confirm this plan without further notice if no objection to confirmation is filed. See Bankruptcy Rule 3015. In addition, you may need to file a timely proof of claim in order to be paid under any plan.

The following matters may be of particular importance. **Debtors must check one box on each line to state whether or not the plan includes each of the following items. If an item is checked as "Not Included" or if both boxes are checked, the provision will be ineffective if set out later in the plan.**

1.1	A limit on the amount of a secured claim, set out in Section 3.2, which may result in a partial payment or no payment at all to the secured creditor	<input checked="" type="checkbox"/> Included	<input type="checkbox"/> Not included
1.2	Avoidance of a judicial lien or nonpossessory, nonpurchase-money security interest, set out in Section 3.4	<input type="checkbox"/> Included	<input checked="" type="checkbox"/> Not included
1.3	Nonstandard provisions, set out in Part 8	<input type="checkbox"/> Included	<input checked="" type="checkbox"/> Not included

Part 2: Plan Payments and Length of Plan

2.1 Debtor(s) will make regular payments to the trustee as follows:

\$ 46.55 per month for 36 months

[and \$  per month for  months]

If fewer than 60 months of payments are specified, additional monthly payments will be made to the extent necessary to make the payments to creditors specified in this plan.



**2.2 Regular payments to the trustee will be made from future income in the following manner:**

Check all that apply.

- ☐ Debtor(s) will make payments pursuant to a payroll deduction order.
- ☒ Debtor(s) will make payments directly to the trustee.
- ☐ Other (specify method of payment): \_\_\_\_\_

**2.3 Income tax refunds.**

Check one.

- ☐ Debtor(s) will retain any income tax refunds received during the plan term.
- ☐ Debtor(s) will supply the trustee with a copy of each income tax return filed during the plan term within 14 days of filing the return and will turn over to the trustee all income tax refunds received during the plan term.
- ☒ Debtor(s) will treat income tax refunds as follows:  
**TAX RETURN LANGUAGE (Required in all plans administered by Tom Vaughn's office)** Debtor(s) shall submit a copy of their Federal Income tax return to the Trustee each year, beginning with the tax return or the year in which this case was filed, no later than April 20th. **TAX REFUND LANGUAGE (Only included if the Trustee so requests)** The Debtor(s) shall tender to the trustee any tax refund in excess of the plan term was confirmed, within 7 days of receipt of the tax of \$1,200.00 each year, beginning the year after the plan is confirmed, within 7 days of receipt of the tax refund. Refunds must be received by the Trustee by June 30th of each year.

**2.4 Additional payments.**

Check one.

- ☒ **None.** If "None" is checked, the rest of § 2.4 need not be completed or reproduced.
- ☐ Debtor(s) will make additional payment(s) to the trustee from other sources, as specified below. Describe the source, estimated amount, and date of each anticipated payment.

[enter source] \_\_\_\_\_ \$ 0.00 [anticipated dt] \_\_\_\_\_

**2.5 The total amount of estimated payments to the trustee provided for in §§ 2.1 and 2.4 is \$ 1,675.80****Part 3: Treatment of Secured Claims****3.1 Maintenance of payments and cure of default, if any.**

Check one.

- ☐ **None.** If "None" is checked, the rest of § 3.1 need not be completed or reproduced.
- ☒ The debtor(s) will maintain the current contractual installment payments on the secured claims listed below, with any changes required by the applicable contract and noticed in conformity with any applicable rules. These payments will be disbursed either by the trustee or directly by the debtor(s), as specified below. Any existing arrearage on a listed claim will be paid in full through disbursements by the trustee, with interest, if any, at the rate stated. Unless otherwise ordered by the court, the amounts listed on a proof of claim filed before the filing deadline under Bankruptcy Rule 3002(c) control over any contrary amounts listed below as to the current installment payment and arrearage. In the absence of a contrary timely filed proof of claim, the amounts stated below are controlling. If relief from the automatic stay is ordered as to any item of collateral listed in this paragraph, then, unless otherwise ordered by the court, all payments under this paragraph as to that collateral will cease, and all secured claims based on that collateral will no longer be treated by the plan. The final column includes only payments disbursed by the trustee rather than by the debtor(s).

Name of creditor	Collateral	Current installment payment (including	Amount of arrearage (if any)	Interest rate on arrearage (if applicable)	Monthly plan payment on arrearage	Estimated total payments by trustee
Ocwen Loan Servicing, LLC	4811 S Justine St. Chicago, IL 60609	\$ 478.70	\$ 0.00	0.00 %	\$ 0.00	\$ 0.00
		Distributed by:				
		<input type="checkbox"/> Trustee				
		<input checked="" type="checkbox"/> Debtor(s)				

Insert additional claims as needed.

**3.2 Request for valuation of security, payment of fully secured claims, and modification of undersecured claims. Check one.**

☐ **None.** If "None" is checked, the rest of § 3.2 need not be completed or reproduced.

*The remainder of this paragraph will be effective only if the applicable box in Part 1 of this plan is checked.*

☒ The debtor(s) request that the court determine the value of the secured claims listed below. For each non-governmental secured claim listed below, the debtor(s) state that the value of the secured claim should be as set out in the column headed *Amount of secured claim*. For secured claims of governmental units, unless otherwise ordered by the court, the value of a secured claim listed in a proof of claim filed in accordance with the Bankruptcy Rules controls over any contrary amount listed below. For each listed claim, the value of the secured claim will be paid in full with interest at the rate stated below.

The portion of any allowed claim that exceeds the amount of the secured claim will be treated as an unsecured claim under Part 5 of this plan. If the amount of a creditor's secured claim is listed below as having no value, the creditor's allowed claim will be treated in its entirety as an unsecured claim under Part 5 of this plan. Unless otherwise ordered by the court, the amount of the creditor's total claim listed on the proof of claim controls over any contrary amounts listed in this paragraph.

The holder of any claim listed below as having value in the column headed *Amount of secured claim* will retain the lien on the property interest of the debtor(s) or the estate(s) until the earlier of:

(a) payment of the underlying debt determined under nonbankruptcy law, or

(b) discharge of the underlying debt under 11 U.S.C. § 1328, at which time the lien will terminate and be released by the creditor.

Name of Creditor	Estimated amount of creditor's total claim	Collateral	Value of Collateral	Amount of claims senior to creditor's claim	Amount of secured claim	Interest rate	Monthly payment to creditor	Estimated total of monthly payments	
City of Chicago, Dept. of Finance	\$ 2,745.00	4811 S Justine St., Chicago, IL	\$ 90,000.00	\$ 99,340.00	\$ 0.00	0.00 %	\$ 0.00	\$ 0.00	

*Insert additional claims as needed.*

**3.3 Secured claims excluded from 11 U.S.C. § 506.**

*Check one.*

☒ **None.** If "None" is checked, the rest of § 3.3 need not be completed or reproduced.

☐ The claims listed below were either:

(1) incurred within 910 days before the petition date and secured by a purchase money security interest in a motor vehicle acquired for the personal use of the debtor(s), or

(2) incurred within 1 year of the petition date and secured by a purchase money security interest in any other thing of value.

These claims will be paid in full under the plan with interest at the rate stated below. These payments will be disbursed either by the trustee or directly by the debtor(s), as specified below. Unless otherwise ordered by the court, the claim amount stated on a proof of claim filed before the filing deadline under Bankruptcy Rule 3002(c) controls over any contrary amount listed below. In the absence of a contrary timely filed proof of claim, the amounts stated below are controlling. The final column includes only payments disbursed by the trustee rather than by the debtor(s).

Name of Creditor	Collateral	Amount of claim	Interest rate	Monthly plan payment	Estimated total payments by trustee
		\$ _____	_____ %	\$ _____	\$ _____
				Distributed by: <input type="checkbox"/> Trustee <input type="checkbox"/> Debtor(s)	

### 3.4 Lien avoidance.

Check one.

☒ **None.** If "None" is checked, the rest of § 3.4 need not be completed or reproduced.

**The remainder of this paragraph will be effective only if the applicable box in Part 1 of this plan is checked.**

☐ The judicial liens or nonpossessory, nonpurchase money security interests securing the claims listed below impair exemptions to which the debtor(s) would have been entitled under 11 U.S.C. § 522(b). Unless otherwise ordered by the court, a judicial lien or security interest securing a claim listed below will be avoided to the extent that it impairs such exemptions upon entry of the order confirming the plan. The amount of the judicial lien or security interest that is avoided will be treated as an unsecured claim in Part 5 to the extent allowed. The amount, if any, of the judicial lien or security interest that is not avoided will be paid in full as a secured claim under the plan. See 11 U.S.C. § 522(f) and Bankruptcy Rule 4003(d). If more than one lien is to be avoided, provide the information separately for each lien.

Information regarding judicial lien or security interest	Calculation of lien avoidance	Treatment of remaining secured claim
Name of creditor	a. Amount of Lien \$ _____	Amount of secured claim after avoidance (line a minus line f) \$ _____
	b. Amount of all other liens \$ _____	\$ _____
Collateral	c. Value of claimed exemptions + \$ _____	Interest rate (if applicable) _____ %
	d. Total of adding lines a, b, and c \$ 0.00	Monthly payment on secured claim \$ _____
Lien identification (such as judgment date, date of lien recording, book and page number)	e. Value of debtor(s)' interest in property - \$ _____	Estimated total payments on secured claim \$ _____
	f. Subtract line e from line d. \$ 0.00	
	Extent of exemption impairment (Check applicable box): <input checked="" type="checkbox"/> Line f is equal to or greater than line a. The entire lien is avoided. (Do not complete the next column.) <input type="checkbox"/> Line f is less than line a. A portion of the lien is avoided. (Complete the next column.)	

**Insert additional claims as needed.**

### 3.5 Surrender of collateral.

Check one.

☒ **None.** If "None" is checked, the rest of § 3.5 need not be completed or reproduced.

☐ The debtor(s) elect to surrender to each creditor listed below the collateral that secures the creditor's claim. The debtor(s) request that upon confirmation of this plan the stay under 11 U.S.C. § 362(a) be terminated as to the collateral only and that the stay under § 1301 be terminated in all respects. Any allowed unsecured claim resulting from the disposition of the collateral will be treated in Part 5 below.

Name of Creditor	Collateral

**Insert additional claims as needed.**

**Part 4: Treatment of Fees and Priority Claims**

**4.1 General**

Trustee's fees and all allowed priority claims, including domestic support obligations other than those treated in § 4.5, will be paid in full without postpetition interest.

**4.2 Trustee's fees**

Trustee's fees are governed by statute and may change during the course of the case but are estimated to be 5.000 % of plan payments; and during the plan term, they are estimated to total \$ 83.79.

**4.3 Attorney's fees**

The balance of the fees owed to the attorney for the debtor(s) is estimated to be \$ 0.00.

**4.4 Priority claims other than attorney's fees and those treated in § 4.5.**

Check one.

☒ **None.** If "None" is checked, the rest of § 4.4 need not be completed or reproduced.

☐ The debtor(s) estimate the total amount of other priority claims to be \$ \_\_\_\_\_.

**4.5 Domestic support obligations assigned or owed to a governmental unit and paid less than full amount.**

Check one.

☒ **None.** If "None" is checked, the rest of § 4.5 need not be completed or reproduced.

☐ The allowed priority claims listed below are based on a domestic support obligation that has been assigned to or is owed to a governmental unit and will be paid less than the full amount of the claim under 11 U.S.C. § 1322(a)(4). *This plan provision requires that payments in § 2.1 be for a term of 60 months; see 11 U.S.C. § 1322(a)(4).*

Name of Creditor	Amount of claim to be paid	
	\$ _____	

Insert additional claims as needed.

**Part 5: Treatment of Nonpriority Unsecured Claims**

**5.1 Nonpriority unsecured claims not separately classified.**

Allowed nonpriority unsecured claims that are not separately classified will be paid, pro rata. If more than one option is checked, the option providing the largest payment will be effective. *Check all that apply.*

☐ The sum of \$ \_\_\_\_\_.

☒ 10.000 % of the total amount of these claims, an estimated payment of \$ 1,592.00.

☒ The funds remaining after disbursements have been made to all other creditors provided for in this plan.

If the estate of the debtor(s) were liquidated under chapter 7, nonpriority unsecured claims would be paid approximately \$ 0.00.  
Regardless of the options checked above, payments on allowed nonpriority unsecured claims will be made in at least this amount.

**5.2 Maintenance of payments and cure of any default on nonpriority unsecured claims. Check one.**

☒ **None.** If "None" is checked, the rest of § 5.2 need not be completed or reproduced.

☐ The debtor(s) will maintain the contractual installment payments and cure any default in payments on the unsecured claims listed below on which the last payment is due after the final plan payment. These payments will be disbursed either by the trustee or directly by the debtor(s), as specified below. The claim for the arrearage amount will be paid in full as specified below and disbursed by the trustee. The final column includes only payments disbursed by the trustee rather than by the debtor(s).

Name of creditor	Current installment payment	Amount of arrearage to be paid	Estimated total payments by trustee
	\$ _____	\$ _____	\$ _____
	Distributed by: <input type="checkbox"/> Trustee <input type="checkbox"/> Debtor(s)		

*Insert additional claims as needed.*

**5.3 Other separately classified nonpriority unsecured claims. Check one.**

☒ **None.** If "None" is checked, the rest of § 5.3 need not be completed or reproduced.

☐ The nonpriority unsecured allowed claims listed below are separately classified and will be treated as follows

Name of creditor	Basis for separate classification and treatment	Amount to be paid on claim	Interest rate (if applicable)	Estimated total amount of payments
		\$ _____	% _____	\$ _____

*Insert additional claims as needed.*

**Part 6: Executory Contracts and Unexpired Leases**

**6.1 The executory contracts and unexpired leases listed below are assumed and will be treated as specified. All other executory contracts and unexpired leases are rejected. Check one.**

☒ **None.** If "None" is checked, the rest of § 6.1 need not be completed or reproduced.

☐ **Assumed items.** Current installment payments will be disbursed either by the trustee or directly by the debtor(s), as specified below, subject to any contrary court order or rule. Arrearage payments will be disbursed by the trustee. The final column includes only payments disbursed by the trustee rather than by the debtor(s).

Name of creditor	Description of leased property or executory contract	Current installment payment	Amount of arrearage to be paid	Treatment of arrearage (refer to other plan section if applicable)	Estimated total payments by trustee
		\$ _____	\$ _____		\$ _____
		Disbursed by: <input type="checkbox"/> Trustee <input type="checkbox"/> Debtor(s)			

*Insert additional contracts or leases as needed*

**Part 7: Vesting of Property of the Estate**

**7.1 Property of the estate will vest in the debtor(s) upon**

Check the applicable box:

- ☐ plan confirmation.  
☒ entry of discharge.  
☐ other: \_\_\_\_\_

**Part 8: Nonstandard Plan Provisions**

**8.1 Check "None" or List Nonstandard Plan Provisions**

- ☒ **None.** If "None" is checked, the rest of Part 8 need not be completed or reproduced.

Under Bankruptcy Rule 3015(c), nonstandard provisions must be set forth below. A nonstandard provision is a provision not otherwise included in the Official Form or deviating from it. Nonstandard provisions set out elsewhere in this plan are ineffective.

The following plan provisions will be effective only if there is a check in the box "Included" in § 1.3.

**Part 9: Signature(s):**

**9.1 Signatures of Debtor(s) and Debtor(s)' Attorney**

If the Debtor(s) do not have an attorney, the Debtor(s) must sign below; otherwise the Debtor(s) signatures are optional. The attorney for the Debtor(s), if any, must sign below.

X

\_\_\_\_\_  
Signature of Debtor 1

\_\_\_\_\_  
Signature of Debtor 2

Executed on  
MM / DD / YYYY

Executed on  
MM / DD / YYYY

X

/s/ Susana Heredia  
\_\_\_\_\_  
Signature of Attorney for Debtor(s)

Date 02/28/2018  
\_\_\_\_\_  
MM / DD / YYYY

By filing this document, the Debtor(s), if not represented by an attorney, or the Attorney for Debtor(s) also certify(ies) that the wording and order of the provisions in this Chapter 13 plan are identical to those contained in Official Form 113, other than any nonstandard provisions included in Part 8.

## Exhibit: Total Amount of Estimated Trustee Payments

The following are the estimated payments that the plan requires the trustee to disburse. If there is any difference between the amounts set out below and the actual plan terms, the plan terms control.

a. Maintenance and cure payments on secured claims (Part 3, Section 3.1 total)	\$ 0.00
b. Modified secured claims (Part 3, Section 3.2 total)	\$ 0.00
c. Secured claims excluded from 11 U.S.C. § 506 (Part 3, Section 3.3 total)	\$
d. Judicial liens or security interests partially avoided (Part 3, Section 3.4 total)	\$
e. Fees and priority claims (Part 4 total)	\$ 83.79
f. Nonpriority unsecured claims (Part 5, Section 5.1, highest stated amount)	\$ 1,592.00
g. Maintenance and cure payments on unsecured claims (Part 5, Section 5.2 total)	\$
h. Separately classified unsecured claims (Part 5, Section 5.3 total)	\$
i. Trustee payments on executory contracts and unexpired leases (Part 6, Section 6.1 total)	\$
j. Nonstandard payments (Part 8, total)	+ \$
Total of lines a through j	\$ 1,675.79

# EXHIBIT D



**IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION**

IN RE:

Graciela Garcia and Pedro Garcia

Debtors.

Case No 18-05801

Judge Carol A. Doyle

Chapter 13

Trustee- Tom Vaughn

**NOTICE OF HEARING ON PLAN CONFIRMATION AND REQUEST FOR  
VALUATION OF SECURED CLAIM**

TO: City of Chicago, Department of Finance  
121 N. LaSalle Street, 7th Floor  
Chicago, IL 60602

City of Chicago – Utility Billing  
PO Box 6330  
Chicago, IL 60680

City of Chicago – Water Management  
333 S State  
Chicago, IL 60604

City of Chicago - Corporation Counsel  
121 N LaSalle Street, Ste. 600,  
Chicago, IL 60602

Trustee – Tom Vaughn\*

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Debtors, Graciela Garcia and Pedro Garcia, have filed a Chapter 13 plan seeking a limit on the amount of a secured claim, set out in Section 3.2 of the plan, which may result in a partial payment or no payment at all to the secured creditor.

***Your secured claim may be reduced, modified or eliminated, and be paid as a general unsecured claim if the proposed plan is confirmed. Copy of the plan is enclosed.***

The hearing on confirmation is scheduled to be held on Tuesday, April 17, 2018 at 10:30 a.m. in Courtroom 742, United States Bankruptcy Court, 219 S. Dearborn St., Chicago, IL, 60604.

/s/ Susana Heredia  
Susana Heredia

Susana Heredia  
Attorney for Debtors

ARDC ID# 6316564  
LAF  
120 S. LaSalle St, Suite 900  
Chicago, IL 60603  
Phone: 312/229-6339

**CERTIFICATE OF SERVICE**

I hereby certify that I have served a copy of the foregoing Notice and the attached Objection, by mailing a copy to the person(s) listed above on this the 9<sup>th</sup> day of March, 2018, except as to persons indicated by an asterisk (\*), who are registrants with the Court's CM/ECF system and have, pursuant to Fed. R. Bankr. P. 7005 and 9036, and §II.B.2 of the Court's Administrative Procedures waived the right to receive notice by first class mail and consented to receive notice electronically, and waived the right to service by personal service or first class mail and consented to receive electronic service.

/s/ Susana Heredia  
Susana Heredia

Fill in this information to identify your case:

Debtor 1 Graciela Garcia  
First Name Middle Name Last Name

Debtor 2 Pedro Garcia  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Northern District Of: Illinois  
(State)

Case number: 18-05801  
(If known)

☐ Check if this is an amended plan, and list below the sections of the plan that have been changed.

\_\_\_\_\_

\_\_\_\_\_

## Official Form 113

### Chapter 13 Plan

12/17

#### Part 1: Notices

**To Debtors:** This form sets out options that may be appropriate in some cases, but the presence of an option on the form does not indicate that the option is appropriate in your circumstances or that it is permissible in your judicial district. Plans that do not comply with local rules and judicial rulings may not be confirmable.

*In the following notice to creditors, you must check each box that applies.*

**To Creditors:** Your rights may be affected by this plan. Your claim may be reduced, modified, or eliminated.

You should read this plan carefully and discuss it with your attorney if you have one in this bankruptcy case. If you do not have an attorney, you may wish to consult one.

If you oppose the plan's treatment of your claim or any provision of this plan, you or your attorney must file an objection to confirmation at least 7 days before the date set for the hearing on confirmation, unless otherwise ordered by the Bankruptcy Court. The Bankruptcy Court may confirm this plan without further notice if no objection to confirmation is filed. See Bankruptcy Rule 3015. In addition, you may need to file a timely proof of claim in order to be paid under any plan.

The following matters may be of particular importance. **Debtors must check one box on each line to state whether or not the plan includes each of the following items. If an item is checked as "Not Included" or if both boxes are checked, the provision will be ineffective if set out later in the plan.**

1.1	A limit on the amount of a secured claim, set out in Section 3.2, which may result in a partial payment or no payment at all to the secured creditor	<input checked="" type="checkbox"/> Included	<input type="checkbox"/> Not Included
1.2	Avoidance of a judicial lien or nonpossessory, nonpurchase-money security interest, set out in Section 3.4	<input type="checkbox"/> Included	<input checked="" type="checkbox"/> Not Included
1.3	Nonstandard provisions, set out in Part 8	<input type="checkbox"/> Included	<input checked="" type="checkbox"/> Not included

#### Part 2: Plan Payments and Length of Plan

**2.1 Debtor(s) will make regular payments to the trustee as follows:**

\$ 46.55 per month for 36 months  
 (and \$ \_\_\_\_\_ per month for \_\_\_\_\_ months)

If fewer than 60 months of payments are specified, additional monthly payments will be made to the extent necessary to make the payments to creditors specified in this plan.

**2.2 Regular payments to the trustee will be made from future income in the following manner:**

Check all that apply.

- ☐ Debtor(s) will make payments pursuant to a payroll deduction order.
- ☒ Debtor(s) will make payments directly to the trustee.
- ☐ Other (specify method of payment): \_\_\_\_\_

**2.3 Income tax refunds.**

Check one.

- ☐ Debtor(s) will retain any income tax refunds received during the plan term.
- ☐ Debtor(s) will supply the trustee with a copy of each income tax return filed during the plan term within 14 days of filing the return and will turn over to the trustee all income tax refunds received during the plan term.
- ☒ Debtor(s) will treat income tax refunds as follows:  
**TAX RETURN LANGUAGE (Required in all plans administered by Tom Vaughn's office)** Debtor(s) shall submit a copy of their Federal income tax return to the Trustee each year, beginning with the tax return for the year in which this case was filed, no later than April 20th. **TAX REFUND LANGUAGE (Only included if the Trustee so requests)** The Debtor(s) shall tender to the trustee any tax refund in excess of the plan was confirmed, within 7 days of receipt of the tax of \$1,200.00 each year, beginning the year after the plan is confirmed, within 7 days of receipt of the tax refund. Refunds must be received by the Trustee by June 30th of each year.

**2.4 Additional payments.**

Check one.

- ☒ None. If "None" is checked, the rest of § 2.4 need not be completed or reproduced.
- ☐ Debtor(s) will make additional payment(s) to the trustee from other sources, as specified below. Describe the source, estimated amount, and date of each anticipated payment.
- [enter source] \_\_\_\_\_ \$ 0.00 [anticipated dt] \_\_\_\_\_

**2.5 The total amount of estimated payments to the trustee provided for in §§ 2.1 and 2.4 is \$ 1,675.80****Part 3: Treatment of Secured Claims****3.1 Maintenance of payments and cure of default, if any.**

Check one.

- ☐ None. If "None" is checked, the rest of § 3.1 need not be completed or reproduced.
- ☒ The debtor(s) will maintain the current contractual installment payments on the secured claims listed below, with any changes required by the applicable contract and noticed in conformity with any applicable rules. These payments will be disbursed either by the trustee or directly by the debtor(s), as specified below. Any existing arrearage on a listed claim will be paid in full through disbursements by the trustee, with interest, if any, at the rate stated. Unless otherwise ordered by the court, the amounts listed on a proof of claim filed before the filing deadline under Bankruptcy Rule 3002(c) control over any contrary amounts listed below as to the current installment payment and arrearage. In the absence of a contrary timely filed proof of claim, the amounts stated below are controlling. If relief from the automatic stay is ordered as to any item of collateral listed in this paragraph, then, unless otherwise ordered by the court, all payments under this paragraph as to that collateral will cease, and all secured claims based on that collateral will no longer be treated by the plan. The final column includes only payments disbursed by the trustee rather than by the debtor(s).

Name of creditor	Collateral	Current installment payment (including)	Amount of arrearage (if any)	Interest rate on arrearage (if applicable)	Monthly plan payment on arrearage	Estimated total payments by trustee
Ocwen Loan Servicing, LLC	4811 S Justine St. Chicago, IL 60609	\$ 478.70 Distributed by: <input type="checkbox"/> Trustee <input checked="" type="checkbox"/> Debtor(s)	\$ 0.00	0.00 %	\$ 0.00	\$ 0.00

Insert additional claims as needed.

**3.2 Request for valuation of security, payment of fully secured claims, and modification of undersecured claims. Check one.**

☐ **None.** If "None" is checked, the rest of § 3.2 need not be completed or reproduced.

*The remainder of this paragraph will be effective only if the applicable box in Part 1 of this plan is checked.*

- ☒ The debtor(s) request that the court determine the value of the secured claims listed below. For each non-governmental secured claim listed below, the debtor(s) state that the value of the secured claim should be as set out in the column headed *Amount of secured claim*. For secured claims of governmental units, unless otherwise ordered by the court, the value of a secured claim listed in a proof of claim filed in accordance with the Bankruptcy Rules controls over any contrary amount listed below. For each listed claim, the value of the secured claim will be paid in full with interest at the rate stated below.

The portion of any allowed claim that exceeds the amount of the secured claim will be treated as an unsecured claim under Part 5 of this plan. If the amount of a creditor's secured claim is listed below as having no value, the creditor's allowed claim will be treated in its entirety as an unsecured claim under Part 5 of this plan. Unless otherwise ordered by the court, the amount of the creditor's total claim listed on the proof of claim controls over any contrary amounts listed in this paragraph.

The holder of any claim listed below as having value in the column headed *Amount of secured claim* will retain the lien on the property interest of the debtor(s) or the estate(s) until the earlier of:

- (a) payment of the underlying debt determined under nonbankruptcy law, or  
(b) discharge of the underlying debt under 11 U.S.C. § 1328, at which time the lien will terminate and be released by the creditor.

Name of Creditor	Estimated amount of creditor's total claim	Collateral	Value of Collateral	Amount of claims senior to creditor's claim	Amount of secured claim	Interest rate	Monthly payment to creditor	Estimated total of monthly payments	
City of Chicago, Dept. of Finance	\$ 2,745.00	4811 S Justine St., Chicago, IL	\$ 90,000.00	\$ 99,340.00	\$ 0.00	0.00 %	\$ 0.00	\$ 0.00	

*Insert additional claims as needed.*

**3.3 Secured claims excluded from 11 U.S.C. § 506.**

*Check one.*

☒ **None.** If "None" is checked, the rest of § 3.3 need not be completed or reproduced.

☐ The claims listed below were either:

- (1) incurred within 910 days before the petition date and secured by a purchase money security interest in a motor vehicle acquired for the personal use of the debtor(s), or  
(2) incurred within 1 year of the petition date and secured by a purchase money security interest in any other thing of value.

These claims will be paid in full under the plan with interest at the rate stated below. These payments will be disbursed either by the trustee or directly by the debtor(s), as specified below. Unless otherwise ordered by the court, the claim amount stated on a proof of claim filed before the filing deadline under Bankruptcy Rule 3002(c) controls over any contrary amount listed below. In the absence of a contrary timely filed proof of claim, the amounts stated below are controlling. The final column includes only payments disbursed by the trustee rather than by the debtor(s).

Name of Creditor	Collateral	Amount of claim	Interest rate	Monthly plan payment	Estimated total payments by trustee
		\$ _____	_____ %	\$ _____	\$ _____
				Distributed by: <input type="checkbox"/> Trustee <input type="checkbox"/> Debtor(s)	

**3.4 Lien avoidance.**

Check one.

☒ **None.** If "None" is checked, the rest of § 3.4 need not be completed or reproduced.**The remainder of this paragraph will be effective only if the applicable box in Part 1 of this plan is checked.**

- ☐ The judicial liens or nonpossessory, nonpurchase money security interests securing the claims listed below impair exemptions to which the debtor(s) would have been entitled under 11 U.S.C. § 522(b). Unless otherwise ordered by the court, a judicial lien or security interest securing a claim listed below will be avoided to the extent that it impairs such exemptions upon entry of the order confirming the plan. The amount of the judicial lien or security interest that is avoided will be treated as an unsecured claim in Part 5 to the extent allowed. The amount, if any, of the judicial lien or security interest that is not avoided will be paid in full as a secured claim under the plan. See 11 U.S.C. § 522(f) and Bankruptcy Rule 4003(d). If more than one lien is to be avoided, provide the information separately for each lien.

Information regarding judicial lien or security interest	Calculation of lien avoidance	Treatment of remaining secured claim
Name of creditor	a. Amount of Lien \$ _____	Amount of secured claim after avoidance (line a minus line f) \$ _____
	b. Amount of all other liens \$ _____	\$ _____
Collateral	c. Value of claimed exemptions + \$ _____	Interest rate (if applicable) _____ %
	d. Total of adding lines a, b, and c \$ 0.00	Monthly payment on secured claim \$ _____
Lien identification (such as judgment date, date of lien recording, book and page number)	e. Value of debtor(s)' interest in property - \$ _____	Estimated total payments on secured claim \$ _____
	f. Subtract line e from line d. \$ 0.00	
	Extent of exemption impairment (Check applicable box):	
	<input checked="" type="checkbox"/> Line f is equal to or greater than line a. The entire lien is avoided. (Do not complete the next column.)	
	<input type="checkbox"/> Line f is less than line a. A portion of the lien is avoided. (Complete the next column.)	

**Insert additional claims as needed.****3.5 Surrender of collateral.**

Check one.

☒ **None.** If "None" is checked, the rest of § 3.5 need not be completed or reproduced.

- ☐ The debtor(s) elect to surrender to each creditor listed below the collateral that secures the creditor's claim. The debtor(s) request that upon confirmation of this plan the stay under 11 U.S.C. § 362(a) be terminated as to the collateral only and that the stay under § 1301 be terminated in all respects. Any allowed unsecured claim resulting from the disposition of the collateral will be treated in Part 5 below.

Name of Creditor	Collateral	

**Insert additional claims as needed.**

**Part 4: Treatment of Fees and Priority Claims****4.1 General**

Trustee's fees and all allowed priority claims, including domestic support obligations other than those treated in § 4.5, will be paid in full without postpetition interest.

**4.2 Trustee's fees**

Trustee's fees are governed by statute and may change during the course of the case but are estimated to be 5.000 % of plan payments; and during the plan term, they are estimated to total \$ 83.79.

**4.3 Attorney's fees**

The balance of the fees owed to the attorney for the debtor(s) is estimated to be \$ 0.00.

**4.4 Priority claims other than attorney's fees and those treated in § 4.5.**

Check one.

☒ None. If "None" is checked, the rest of § 4.4 need not be completed or reproduced.

☐ The debtor(s) estimate the total amount of other priority claims to be \$ \_\_\_\_\_.

**4.5 Domestic support obligations assigned or owed to a governmental unit and paid less than full amount.**

Check one.

☒ None. If "None" is checked, the rest of § 4.5 need not be completed or reproduced.

☐ The allowed priority claims listed below are based on a domestic support obligation that has been assigned to or is owed to a governmental unit and will be paid less than the full amount of the claim under 11 U.S.C. § 1322(a)(4). This plan provision requires that payments in § 2.1 be for a term of 60 months; see 11 U.S.C. § 1322(a)(4).

Name of Creditor	Amount of claim to be paid	
	\$ _____	

Insert additional claims as needed.

**Part 5: Treatment of Nonpriority Unsecured Claims****5.1 Nonpriority unsecured claims not separately classified.**

Allowed nonpriority unsecured claims that are not separately classified will be paid, pro rata. If more than one option is checked, the option providing the largest payment will be effective. Check all that apply.

☐ The sum of \$ \_\_\_\_\_.

☒ 10.000 % of the total amount of these claims, an estimated payment of \$ 1,592.00.

☒ The funds remaining after disbursements have been made to all other creditors provided for in this plan.

If the estate of the debtor(s) were liquidated under chapter 7, nonpriority unsecured claims would be paid approximately \$ 0.00.  
Regardless of the options checked above, payments on allowed nonpriority unsecured claims will be made in at least this amount.

**5.2 Maintenance of payments and cure of any default on nonpriority unsecured claims. Check one.**☒ **None.** If "None" is checked, the rest of § 5.2 need not be completed or reproduced.☐ The debtor(s) will maintain the contractual installment payments and cure any default in payments on the unsecured claims listed below on which the last payment is due after the final plan payment. These payments will be disbursed either by the trustee or directly by the debtor(s), as specified below. The claim for the arrearage amount will be paid in full as specified below and disbursed by the trustee. The final column includes only payments disbursed by the trustee rather than by the debtor(s).

Name of creditor	Current installment payment	Amount of arrearage to be paid	Estimated total payments by trustee
	\$ _____	\$ _____	\$ _____
Distributed by:			
<input type="checkbox"/> Trustee			
<input type="checkbox"/> Debtor(s)			

Insert additional claims as needed.

**5.3 Other separately classified nonpriority unsecured claims. Check one.**☒ **None.** If "None" is checked, the rest of § 5.3 need not be completed or reproduced.☐ The nonpriority unsecured allowed claims listed below are separately classified and will be treated as follows

Name of creditor	Basis for separate classification and treatment	Amount to be paid on claim	Interest rate (if applicable)	Estimated total amount of payments
		\$ _____	% \$ _____	

Insert additional claims as needed.

**Part 6: Executory Contracts and Unexpired Leases****6.1 The executory contracts and unexpired leases listed below are assumed and will be treated as specified. All other executory contracts and unexpired leases are rejected. Check one.**☒ **None.** If "None" is checked, the rest of § 6.1 need not be completed or reproduced.☐ **Assumed items.** Current installment payments will be disbursed either by the trustee or directly by the debtor(s), as specified below, subject to any contrary court order or rule. Arrearage payments will be disbursed by the trustee. The final column includes only payments disbursed by the trustee rather than by the debtor(s).

Name of creditor	Description of leased property or executory contract	Current installment payment	Amount of arrearage to be paid	Treatment of arrearage (refer to other plan section if applicable)	Estimated total payments by trustee
		\$ _____	\$ _____		\$ _____
Disbursed by:					
<input type="checkbox"/> Trustee					
<input type="checkbox"/> Debtor(s)					

Insert additional contracts or leases as needed



**Part 7: Vesting of Property of the Estate**

**7.1 Property of the estate will vest in the debtor(s) upon**

Check the applicable box:

- ☐ plan confirmation.  
☒ entry of discharge.  
☐ other: \_\_\_\_\_

**Part 8: Nonstandard Plan Provisions**

**8.1 Check "None" or List Nonstandard Plan Provisions**

- ☒ **None.** If "None" is checked, the rest of Part 8 need not be completed or reproduced.

Under Bankruptcy Rule 3015(c), nonstandard provisions must be set forth below. A nonstandard provision is a provision not otherwise included in the Official Form or deviating from it. Nonstandard provisions set out elsewhere in this plan are ineffective.

The following plan provisions will be effective only if there is a check in the box "Included" in § 1.3.

**Part 9: Signature(s):**

**9.1 Signatures of Debtor(s) and Debtor(s)' Attorney**

If the Debtor(s) do not have an attorney, the Debtor(s) must sign below; otherwise the Debtor(s) signatures are optional. The attorney for the Debtor(s), if any, must sign below.

X

\_\_\_\_\_  
Signature of Debtor 1

\_\_\_\_\_  
Signature of Debtor 2

Executed on  
MM / DD / YYYY

Executed on  
MM / DD / YYYY

X

/s/ Susana Heredia

Date 02/28/2018

\_\_\_\_\_  
Signature of Attorney for Debtor(s)

\_\_\_\_\_  
MM / DD / YYYY

By filing this document, the Debtor(s), if not represented by an attorney, or the Attorney for Debtor(s) also certify(ies) that the wording and order of the provisions in this Chapter 13 plan are identical to those contained in Official Form 113, other than any nonstandard provisions included in Part 8.

**Exhibit: Total Amount of Estimated Trustee Payments**

The following are the estimated payments that the plan requires the trustee to disburse. If there is any difference between the amounts set out below and the actual plan terms, the plan terms control.

- |   |             |
|---|-------------|
| a. Maintenance and cure payments on secured claims (Part 3, Section 3.1 total)              | \$ 0.00     |
| b. Modified secured claims (Part 3, Section 3.2 total)                                      | \$ 0.00     |
| c. Secured claims excluded from 11 U.S.C. § 506 (Part 3, Section 3.3 total)                 | \$          |
| d. Judicial liens or security interests partially avoided (Part 3, Section 3.4 total)       | \$          |
| e. Fees and priority claims (Part 4 total)  | \$ 83.79    |
| f. Nonpriority unsecured claims (Part 5, Section 5.1, highest stated amount)                | \$ 1,592.00 |
| g. Maintenance and cure payments on unsecured claims (Part 5, Section 5.2 total)            | \$          |
| h. Separately classified unsecured claims (Part 5, Section 5.3 total)                       | \$          |
| i. Trustee payments on executory contracts and unexpired leases (Part 6, Section 6.1 total) | \$          |
| j. Nonstandard payments (Part 8, total)   | + \$        |

Total of lines a through j

\$ 1,675.79

# EXHIBIT E

UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
Eastern Division

In Re:	)	BK No.: 18-05801
Graciela Garcia and Pedro Garcia	)	
	)	
	)	Chapter: 13
	)	Honorable Carol A. Doyle
	)	
Debtor(s)	)	

**Order Confirming Plan**

The plan under Chapter 13 of the Bankruptcy code, filed as docket No. 7, having been found by the Court to comply with the provisions of the 11 U.S.C. section 1325, THE PLAN IS HEREBY CONFIRMED.

All property of the estate, as specified by the 11 U.S.C. section 541 and 1306, will continue to be property of the estate following confirmation, unless (1) the plan provides for surrender of the property, or (2) the property is sold pursuant to the plan or court order.

Enter:



Honorable Carol A. Doyle

United States Bankruptcy Judge

Dated: April 17, 2018

# EXHIBIT F

**UNITED STATES BANKRUPTCY COURT, NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION**

RE: GRACIELA GARCIA  
PEDRO GARCIA

) Case No. 18 B 05801  
)  
Debtors ) Chapter 13  
)  
) Judge: CAROL A DOYLE

**NOTICE OF MOTION**

GRACIELA GARCIA  
PEDRO GARCIA  
4811 S JUSTINE ST  
CHICAGO, IL 60609

LAF  
via Clerk's ECF noticing procedures

Please take notice that on August 14, 2018 at 9:15 am my designee or I will appear before the Honorable Judge CAROL A DOYLE at 219 South Dearborn Courtroom 742, Chicago, IL and present the motion set forth below.

I certify under penalty of perjury that this office caused a copy of this notice to be delivered to the persons named above by U.S. mail at 55 E Monroe St., Chicago, IL 60603 or by the methods indicated on June 26, 2018.

/s/ Tom Vaughn

**TRUSTEE'S MOTION TO DISMISS FOR TERM OF PLAN**

Now comes Tom Vaughn, Trustee in the above entitled case and moves the Court to dismiss this case in support thereof states:

1. On February 28, 2018 the Debtors filed a petition and plan under Chapter 13 of Title 11 U.S.C.
2. The debtor's plan was confirmed on April 17, 2018, for a period of 36 months.
3. The plan will complete in 94 months, from the date of confirmation.

WHEREFORE, the Trustee prays that this case be dismissed for material default by the debtor with respect to a term of a confirmed plan, pursuant to § 1322 (d) and § 1307 (c) (6).

Respectfully submitted,

TOM VAUGHN  
CHAPTER 13 TRUSTEE  
55 E. Monroe Street, Suite 3850  
Chicago, IL 60603  
(312) 294-5900

/s/ Tom Vaughn

UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
Eastern Division Div

In Re:  
GRACIELA GARCIA  
PEDRO GARCIA

)  
)  
)  
)  
)  
)

Case No.: 1805801  
Chapter: 13  
Honorable CAROL A DOYLE

Debtor(s) )

ORDER DISMISSING FOR TERM OF PLAN

This matter coming before the court on Trustee's Motion to Dismiss, due notice having been given and the court having heard the facts presented;

IT IS THEREFORE ORDERED that this case is dismissed for material default by the debtor with respect to a term of a confirmed plan, pursuant to § 1322 (d) and § 1307 (c) (6).

Enter:

Honorable CAROL A DOYLE  
United States Bankruptcy Judge

Dated:

**Prepared by counsel of Movant:**

Tom Vaughn  
Chapter 13 Trustee  
55 E. Monroe Street, Suite 3850  
Chicago, IL 60603  
(312) 294-5900